

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009		Docket Number (Optional)
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		MERCK-3589
Application Number 10/518,433		Filed June 7, 2005
For METHOD AND SYSTEM FOR DETECTING AND ANALYZING CLINICAL PICTURES AND THE CAUSES THEREOF AND FOR DETERMINING PROPOSALS FOR APPROPRIATE THERAPY		
Art Unit 3736	Examiner Kai Rajan	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	_____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	<u>\$490</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	_____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	_____

Applicant claims small entity status. See 37 CFR 1.27.
 A check in the amount of the fee is enclosed.
 Payment by credit card via EFS.
 The Director has already been authorized to charge fees in this application to a Deposit Account.
 The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-3402.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the applicant/inventor.
 assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 attorney or agent of record. Registration Number 50,908.
 attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____.

<u>/Csaba Henter/</u>	<u>September 28, 2010</u>
<u>Signature</u>	<u>Date</u>
<u>Csaba Henter</u>	<u>(703) 243-6333</u>

Typed or printed name _____ Telephone Number _____

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.